

Attorney's Docket No. 199-003

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent application

of Mark Manuel et al. Inventor(s)

In re application of: Mark Manuel et al.

Serial No.: 09/930,601

Group No.: 1722

Filed: 08/14/2001

Examiner: Heckenberg Jr, Donald H.

For: A Tool And A Method for Making A Tool .

Assistant Commissioner for Patents

P.O. Box 1450

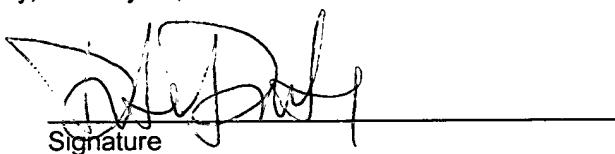
Alexandria, VA 22313-1450

THIRD INFORMATION DISCLOSURE STATEMENT

CERTIFICATION

I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as Priority Mail on Tuesday, January 25, 2005.

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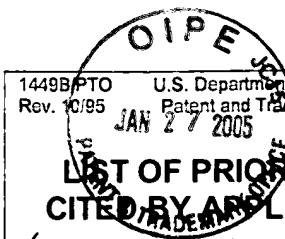


Signature

Dita Dauti

(type or print name of person certifying)

(Information Disclosure Statement [6-1] – page 1 of _____)



1449B PTO U.S. Department of Commerce Rev. 10/95		Complete If Known				
Patent and Trademark Office		Application Number		09/930,601		
JAN 27 2005		Filing Date		08/14/2001		
LIST OF PRIOR ART CITED BY APPLICANT (use as many sheets as necessary)		First Named Inventor		Mark Manuel et al.		
		Group Art Unit		1722		
		Examiner Name		Heckenburg Jr, Donald H.		
Sheet	1	of	1	Attorney Docket Number		199-003

U.S. PATENT DOCUMENTS						
Examiner Initials	Cite No. ¹	Number	Kind Code (If known)	Name of Patentee or Applicant of Cited Document	Date of Publication or Cited Document MM-DD-YY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials	Cite No. ¹	Office	Number	Kind Code (If known)	Name of Patentee or Applicant of Cited Document	Date of Publication or Cited Document MM-DD-YY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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			XP- 00080337 0		Walczuk	November 1998	
Examiner Signature		Date Considered					

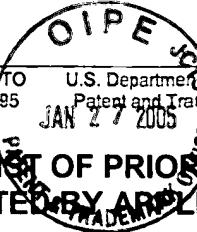
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(Information Disclosure Statement – Section 2, FORM 1449A/PTO [6-1] – page 6 of 6)



1449B/PTO U.S. Department of Commerce Rev. 10/95 Patent and Trademark Office		Complete If Known	
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(Information Disclosure Statement – Section 2. FORM 1449A/PTO [6-1] – page ____ of ____)

Any fee charged due to this submission may be charged to deposit account 03-1723. A duplicate of this transmittal is attached.

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